

Proposed 2005-07 Policy Initiative

Name of Initiative	Health Disparities and Men of Color
Sponsor	Health Disparities, Frankie Manning
Lead Staff	Tara Wolff
Other Committees	Access
Summary	Men of color suffer disease and die in numbers way out of proportion to their size in the population. Men of color experience many diseases (high blood pressure, HIV/AIDS, diabetes, etc.) which could be prevented and/or managed if detected early. However, for a variety of reasons, many young men of color (aged 15-24 years) are not receiving appropriate regular health care, especially when compared to white males in the same age group.
SHR Strategic Direction	<input checked="" type="checkbox"/> Maintain and improve the public health system <input type="checkbox"/> Ensure fair access to critical health services <input checked="" type="checkbox"/> Improve health outcomes and increase value <input checked="" type="checkbox"/> Explore ways to reduce health disparities <input type="checkbox"/> Improve nutrition and increase physical activity <input type="checkbox"/> Reduce tobacco use <input type="checkbox"/> Safeguard environments that sustain human health
Governor's Initiatives	<input checked="" type="checkbox"/> Cost Containment <input type="checkbox"/> Cover all Kids by 2010 <input checked="" type="checkbox"/> Healthiest State in the Nation
Possible Partners	Commission on African American Affairs Commission on Hispanic Affairs Commission on Asian Pacific American Affairs Governor's Office on Indian Affairs Department of Health DSHS – MAA Private Health Insurance Companies representatives Association of Washington Healthcare Plans Office of the Insurance Commissioner Association of Washington Business Washington Chapter of American Academy of Family Medicine Veteran's Administration Department of Veterans Affairs Department of Corrections
Criteria	<input checked="" type="checkbox"/> Does the issue involve multiple agencies? <input checked="" type="checkbox"/> Can a measurable difference be made? <input checked="" type="checkbox"/> Prevalence, Severity and availability of interventions <input checked="" type="checkbox"/> Level of public input/demand <input checked="" type="checkbox"/> Does it involve the entire state? <input checked="" type="checkbox"/> Does the Board have statutory authority? <input checked="" type="checkbox"/> Do the resources exist to deal with the issue? <input checked="" type="checkbox"/> Does the Board have a potentially unique role?

Problem Statement

Because men from racial and ethnic minority populations face such a high risk of heart disease, diabetes, HIV/AIDS, and other conditions and often lack access to basic care, they are now experiencing serious health care issues. Men of color are overall less likely to have health insurance and less likely to access health care services than their white counterparts. Men of color also disproportionately lack access to much-needed mental health, substance abuse, and oral health services.

It must be noted that racism cannot be ignored as a factor affecting many health issues for people of color—regardless of gender. According to three major studies published in 2005, Black Americans still get far fewer operations, tests, medications, and other life-saving treatments than whites, despite years of efforts to erase racial disparities in health care and help African Americans live equally long and healthy lives.

Potential Strategies

A number of strategies may be needed to address this issue possibly including: improving health insurance coverage, enhancing points of entry into health care, increasing availability of community-based screening, providing more outreach and education (such as “marketing” more to men of color), offering more culturally sensitive health care, conducting more research, and developing policies. Other determinants in areas such as the interplay between health and poverty, causes of risky health behaviors, etc. should also be explored. The relationship between health disparities and men of color will need to be examined in a broader context than just health care and health care access in order to address it effectively.

Convene task force to explore health, social justice, environmental, and behavioral issues affecting men of color in Washington State, to determine the scope of the problem, available resources, and if there are some practical effective solutions which could be developed further.

Criteria

Does the issue involve multiple agencies?

Yes.

Can a measurable difference be made?

Yes, if money were invested in research examining outcome measures. Otherwise, some proxy measures could be investigated such as morbidity and mortality rates by disease for specific age/race/ethnicity groups. The Healthy Youth Survey may provide some data for boys aged 15-18 years if the data sets broken down by race/ethnicity are large enough to analyze.

Prevalence, Severity and availability of interventions

According to 2000 census data, about 20 percent of Washington State’s population is non-white. The latest statistics from the Office of Financial Management indicate that non-white populations will grow rapidly from 2000 to 2030—with the Hispanic population increasing the most rapidly. So unless health disparities are addressed effectively, it is reasonable to expect them to expand with alarming effects.

There are a number of health initiatives for men across the country that could be contacted to learn more about effective outreach and care. For instance, in Baltimore, a no-charge primary care facility for uninsured men opened in 2000.

Level of public input/demand

Not known. However, several Web sites for people of color and a grant from the W.K. Kellogg Foundation are focused on this issue.

Does it involve the entire state?

Yes.

Does the Board have statutory authority?

None needed. The Board has general authority to “explore ways to improve the health status of the citizenry.”

Do the resources exist to deal with the issue?

Potentially, depending on work load level.

Does the Board have a potentially unique role?

Yes, as a convener and leader in health.